

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Dean H. Grant

Mailing Address 3669 Sussex Drive Northeast

City State Zip Code
 Milledgeville GA 31061-9382

FEC ID number of contributing federal political committee.

C

Name of Employer
 New York Life Insurance Company

Occupation
 Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 02 28 2013

Transaction ID : PR10588197

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Mr. Tigran Basmadjyan

Mailing Address 660 Bohlig Road

City State Zip Code
 Glendale CA 91207-1402

FEC ID number of contributing federal political committee.

C

Name of Employer
 New York Life Insurance Company

Occupation
 Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 02 28 2013

Transaction ID : PR1063038197

Amount of Each Receipt this Period

230.76

P/R Deduction (\$115.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Kevin S. Odell

Mailing Address PO Box 889

City State Zip Code
 Claxton GA 30417-0889

FEC ID number of contributing federal political committee.

C

Name of Employer
 New York Life Insurance Company

Occupation
 Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 02 28 2013

Transaction ID : PR10648197

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

730.76